



WARMIN' UP—Rehearsing for the Kiwanis Kavalade talent show to be held at the Torrance Civic Auditorium tomorrow and Saturday are Donna Greene, 10, singer, Kathy Whitney, 14, dancer, and Patty Joyal, 8, singer, while Roy Gordon, producer of the show, gives some helpful advice.

—Press photo

Kiwanis Talent Show Presented For Two Nights

The Kiwanis Kavalade of Youth Show slated for tomorrow and Saturday evening, will feature a Talent Quest in conjunction with a big stage production.

Twelve specially acts, singers and dancers, and musicians, will compete for \$100 in prizes, TV appearances and gift certificates. The producer of the show, Roy Gordon has contacts whereby talent will be selected to appear

The Dentist Says:

By DR. ERNEST J. TARR

It's Wiser

to Replace

Teeth Promptly

"My friends tell me that I ought to wait six months before I have my dentures made. They say the gums shrink afterward and it isn't good to have your teeth put in right after your own are extracted," says Mr. L. R. of Torrance.

It's not necessary to wait for as long as six months before dentures are made. It is known when a person waits for complete bone shrinkage, other things happen at the same time. The tongue, for instance, becomes enlarged, and thus will add to difficulties present during the adjustment period of the new denture. When all teeth are removed, the jaws do not operate in their usual manner. New chewing habits are formed. If these mechanically objectionable habits are continued, the future dentures will be uncomfortable. Also, if too long a period intervenes between extraction and replacement, it is often more complicated to restore the facial expression that previously existed.

The best solution is to have teeth replaced as soon as possible after extraction if not at the same visit.

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"My denture is broken right down the middle. Can it be repaired and, if so, how long will it take," asks Mrs. L. F. of Lomita.

This is a call I receive several times a day on the telephone and my usual answer is, "Come right down to the office and wait for your denture while we repair it."

This office offers a complete repair service which includes replacing broken teeth on dentures, repairing cracked or broken plates, repairing clasps on removable bridges, and replacing broken teeth on fixed or permanent bridgework.

Any of these repairs will take an hour or less. But the important thing to remember is that you can bring in your denture any time until 7:00 p.m. and we will repair it for you. Also, since we are open on Saturday, we can fix your denture on that day also.

We have a complete stock of denture teeth so we can replace your missing tooth in exactly the same shade and mold as the one you lost.

DR. TARR

1311 1/2 SARTORI AVENUE
Phone: FAirfax 8-0250

Tetanus One of Few Infections with High Mortality Rate, Doctor Warns

Roy O. Gilbert, M.D.
Los Angeles County Health Officer

Tetanus is one of the few infections that still has a high mortality. Although the death rate has dropped owing to modern treatment and health education, it is still high. Fortunately, the disorder is comparatively rare in occurrence and prophylactic measures are generally effective.

A study of tetanus cases treated at the Mayo Clinic between 1911 and 1954 reveals that the mortality was 58 per cent in 1925, 57 per cent until 1934, dropped to 39 per cent in the next 10 years and was 27 per

cent in the last year covered by the study. The final rate given is not true for the nation as a whole, however, for the fatality rate is usually much higher than 27 per cent.

It was noted that there are grades of severity in the infection which range from an illness that is relatively mild in nature to one that has a mortality of 100 per cent.

Age was also a factor. The fatality rate was high in the first 10 years of life and after the age of 50. The lowest mortality was noted in the second and third decades.

Tetanus is most likely to oc-

cur after serious injury involving breakage of the skin, or when the tetanus organisms get into puncture wounds such as those made by nails, slivers, or deep thorn pricks. It may, however, be the sequence of apparently superficial abrasions and lacerations. In fact, any wound that seals itself off from the air permits the germs to multiply rapidly and produce the toxin that causes the infection.

Active immunization with tetanus toxoid provides complete protection against the infection. There is wide-spread distribution of the germs of tetanus in the soil, and the wonder of it is that the infection isn't acquired more frequently than it now is. Certainly all children should be protected with the toxoid. All persons who ride in automobiles—

which includes just about every body — are candidates for exposure to the infection and should be protected.

There are two substances that afford protection against tetanus, toxoid and tetanus antitoxin. In emergencies, when the individual is not known to be protected with tetanus toxoid, tetanus antitoxin is administered. This affords quick, but passive, protection against infection in most instances. Although it usually produces immunity to the disease within a few minutes, the protection lasts but a few weeks. This method involves the risk of serum reaction in certain individuals which may be serious or fatal.

The safest protection against tetanus is active immunization with tetanus toxoid. A series of two injections given a month apart provides active immunity

and eliminates the possibility of infection over a much longer period of time. However, the toxoid does not become effective until four to six weeks after its administration.

A person who has had toxoid injections should carry a card on which this information is stated. This may eliminate the necessity of the administration of tetanus antitoxin in an emergency, although both may be needed in some instances.

Since the duration of immunity to tetanus is not precisely known, it is recommended that a booster dose of toxoid be given within a year following the initial doses and then at intervals of four or five years thereafter.

As there's no telling when an injury will occur, active immunization against tetanus is strongly recommended by all physicians.

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For additional information on tetanus send a card of request to the Los Angeles County Health Department, Division of Health Education, 241 North Figueroa Street, Los Angeles 12.

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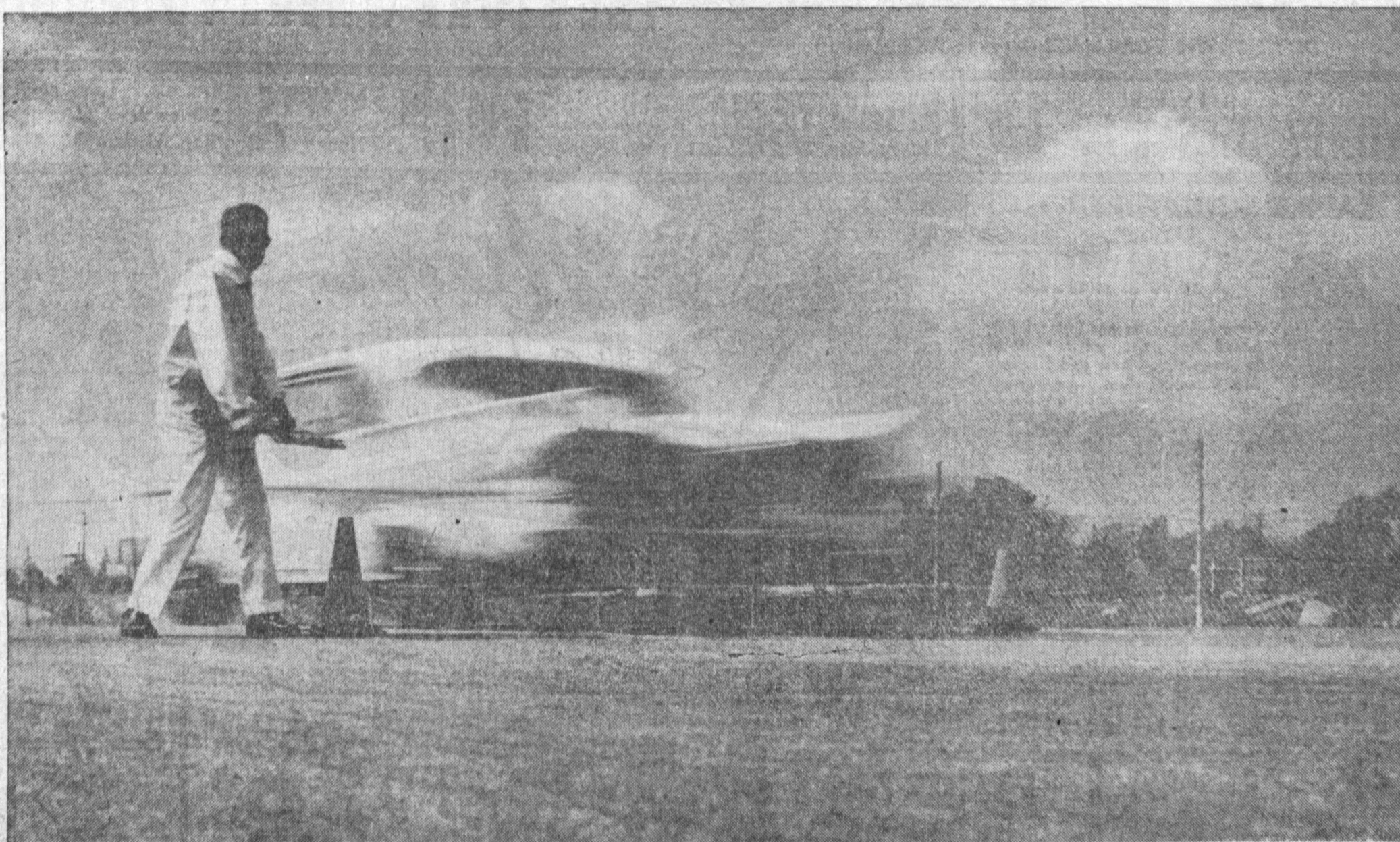
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Established April 15, 1949
Publication office at 1406 Cravens Ave., Torrance, California. Plant at 20366 So. Hawthorne Blvd., Torrance, California.

Published Semi-Weekly, Thursday and Monday. Entered as second class matter Oct. 8, 1957, at Post Office, Torrance, California, under act of March 3, 1879.

Adjudicated a legal newspaper by Superior Court, Los Angeles County, Calif. Adjudicated Decree No. L. B. 23368, April 9, 1958.

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Subscription Rates
Carrier Delivery . . . 45c per Month
Local and Out-of-Town, per Year . . . \$12.00
(Payable in advance)

Second-class mail privileges authorized at Torrance, California

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